Fill in this information to identify your ca		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS		
Case number (if known):	Chapter you are filing under:  ✓ Chapter 7  ─ Chapter 11  ─ Chapter 12  ─ Chapter 13	Check if this is an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Р	art 1: Identify Yourself		
1.	Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
••	Write the name that is on your government-issued picture identification (for example, your driver's license or	Elvis First Name L.	First Name
	passport).	Middle Name  Hall	Middle Name
	Bring your picture identification to your meeting	Last Name  Jr.	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	First Name	First Name
In	Include your married or maiden names.	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>4</u> <u>0</u> <u>3</u> <u>1</u>	xxx - xx
	number or federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx
4.	Any business names and Employer Identification Numbers	✓ I have not used any business names or EINs.	☐ I have not used any business names or EINs.
	(EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and doing business as names	Business name	Business name
	doing business as names	Business name	Rusiness name

Debtor		L. Doc 1 Filed 02/08/16 Entered (	02/08/16 18:48:40 Desc Main Case number (if known)			
	riistivame	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
		<sup>_</sup>				
5. W	here you live		If Debtor 2 lives at a different address:			
	•	7006 W. 99th Street				
		Number Street	Number Street			
		#202				
		Chicago Ridge IL 60415				
		City State ZIP Code	City State ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.			
		Number Street	Number Street			
		P.O. Box	P.O. Box			
		City State ZIP Code	City State ZIP Code			
	hy you are choosing	Check one:	Check one:			
	nis district to file for ankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)			
Part	2: Tell the Court A	About Your Bankruptcy Case				
	ne chapter of the ankruptcy Code you	Check one: (For a brief description of each, see N for Bankruptcy (Form 2010)). Also, go to the top of	otice Required by 11 U.S.C. § 342(b) for Individuals Filir f page 1 and check the appropriate box.			
ar	e choosing to file	Observer 7				
ur	nder					
		Chapter 11				
		Chapter 12				
		☐ Chapter 13				

Deb	tor 1 Case 16-03837	L. Do	c 1	Filed 02/08/16  Document	Entered 02	/08/10	6 18:48:40 er (if known)	) Desc Main	
	First Name	Middle N	lame	DOGGANAMENT	rage 3 01 3	4			
8.	How you will pay the fee	$\overline{\mathbf{Q}}$	court pay w	pay the entire fee when for more details about h with cash, cashier's check If, your attorney may pay	ow you may pay.  T k, or money order.	ypically, If your a	if you are pay ttorney is subn	ng the fee yourself, y nitting your payment o	ou may
				d to pay the fee in instandary duals to Pay Your Filing	•			nd attach the Applica	ation for
			By law than fee in	uest that my fee be wai w, a judge may, but is no 150% of the official pove n installments). If you ch I Fee Waived (Official Fo	ot required to, waive erty line that applies oose this option, yo	e your fee to your ou must f	e, and may do family size and fill out the Appl	so only if your income I you are unable to pa	e is less ay the
9.	Have you filed for		No						
	bankruptcy within the last 8 years?		Yes.						
	,	Dis:	trict			When		Case number	
		2.0	_			M	M / DD / YYYY	Case number	
		Dis	trict _			When _	M / DD / YYYY	Case number	
		Dia	· · . ·				M / DD / YYYY	C	
		DIS	trict			When _ M	M / DD / YYYY	Case number	
10.	Are any bankruptcy	$\overline{\mathbf{V}}$	No						
	cases pending or being filed by a spouse who is	П	Yes.						
	not filing this case with	 Del	otor				Relationshi	p to you	
	you, or by a business partner, or by an		_						
	affiliate?	DIS	trict _			When _ M	M / DD / YYYY	Case number,if known	
		Deb	otor _				Relationshi	p to you	
		Dis	trict			When		Case number,	
			_		_		M / DD / YYYY		
11.	Do you rent your residence?	□ <b>☑</b>	No. Yes.	Go to line 12. Has your landlord obta residence?	ined an eviction jud	lgment a	igainst you and	do you want to stay	in your
				✓ No. Go to line 12.  ✓ Yes. Fill out Initia		an Evicti	on Judgment A	Against You (Form 10	01A)

and file it with this bankruptcy petition.

Deb	otor 1 Case 16-03837 L First Name M	Do		Filed 02/08/16 Docstingent	Entered 02/08/16 1 Page 4 of 54 number (if	8:48:40 f known)	Desc	: Main	
P	art 3: Report About Ar	ıy Bı	ısine	sses You Own as a	a Sole Proprietor				
2.	Are you a sole proprietor of any full- or part-time business?			Go to Part 4. Name and location of b	usiness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any  Number Street					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busin Single Asset Real Stockbroker (as d	box to describe your business: ness (as defined in 11 U.S.C. § I Estate (as defined in 11 U.S.C. § efined in 11 U.S.C. § 101(53A)) er (as defined in 11 U.S.C. § 101	. § 101(51B)	ZIP Cod	de	
3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business		can mos	set ap st rece	opropriate deadlines. If y nt balance sheet, statem	the court must know whether yo you indicate that you are a small tent of operations, cash-flow sta ot exist, follow the procedure in 1	business de tement, and	ebtor, you federal ind	must attach your come tax return	
	## Note   ## No			the Bankruptcy Code.	under Chapter 11, but I am NOT a small business debtor according to the definition in uptcy Code.  under Chapter 11 and I am a small business debtor according to the definition in the				
P	art 4: Report If You Ov	vn oı	r Hav	e Any Hazardous F	Property or Any Property	That Nee	ds Imm	ediate Attention	
4.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable	<b>V</b>	No Yes.	What is the hazard?					
	hazard to public health or safety? Or do you own any property that needs immediate attention?			If immediate attention i	is needed, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				Where is the property?	Number Street				
					City		State	ZIP Code	

#### Part 5:

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about
credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing ab	out
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Case 16-0383 First Name	7 L. Doo		Filed 02/08/1	.6 <del></del> F	Entered 02/08/16 18 Page 6 of 54 number (if	3:48 know	:40 Desc Main	
Pá	art 6: Answer Thes	se Questi	ons	for Reporting P	urpo	ses			
16.	What kind of debts do yo have?	u 16a.	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(as "incurred by an individual primarily for a personal, family, or household purpose."</li> <li>✓ No. Go to line 16b.</li> <li>✓ Yes. Go to line 17.</li> </ul>						
		16b.		•	-	siness debts? Business debit tment or through the operation		debts that you incurred to obtain e business or investment.	
		16c.	Stat	e the type of debts y	ou ow	e that are not consumer or bu	siness	debts.	
17.	Are you filing under Chapter 7?		No.	I am not filing unde	r Char	oter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	administrative expenses are paid that fur					-		
18.	How many creditors do you estimate that you owe?		1-49 50-99 100-1 200-9	99		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.	How much do you estimate your assets to be worth?		\$50,0 \$100,	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.	How much do you estimate your liabilities to be?		\$50,0 \$100,	0,000 01-\$100,000 001-\$500,000 001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Pa	art 7: Sign Below								
For	you		e exa	•	ınd I d	eclare under penalty of perjury	y that	the information provided is true	
		or 13	3 of titl					f eligible, under Chapter 7, 11, 12, der each chapter, and I choose to	
If no attorney represents me and I did not pay or agree to pay someone who is an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).									
		I req	uest re	elief in accordance w	ith the	e chapter of title 11, United Sta	ates C	ode, specified in this petition.	
		conn	ectior	-	ase ca	an result in fines up to \$250,00	-	money or property by fraud in imprisonment for up to 20 years,	

X /s/ Elvis L. Hall, Jr. Elvis L. Hall, Jr., Debtor 1

Executed on 02/08/2016 MM / DD / YYYY Signature of Debtor 2

Executed on MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Claudia F. Badillo	Date	02/08/2016	
Signature of Attorney for Debtor	_	MM / DD / YYYY	
Claudia F. Badillo			
Printed name			
Badillo Law Group			
Firm Name			
PO BOX 56941			
Number Street			
Chicago	<u>                                      </u>	60656	
City	State	ZIP Code	
Contact phone (773) 716-7736	Email address <b>hadill</b>	olawyer@gmail.com	
(173) 110-1730	Liliali addiess <b>Dadili</b>	nawyei @giliali.com	
6204002			
6294992 Bar number	State	_	
Dai Humber	State		

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				ocument Pade 8		+	
Fi	ill in this info	rmation to ide	entify your cas	se and this filing:			
De	ebtor 1	Elvis	L.	Hall, Jr.			
		First Name	Middle Name	Last Name			
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			
Ur	nited States Banl	kruptcy Court for th	ne: <b>NORTHERN</b>	DISTRICT OF ILLINOIS			
Ca	ase number						
	known)					☐ Check i amende	f this is an ed filing
Of	ficial Form	106A/B					
Sc	hedule A/E	B: Property					12/15
the filin she	asset in the cat ng together, both net to this form.	egory where you h are equally resp On the top of any	think it fits best. consible for supp additional page	List an asset only once. If a Be as complete and accura lying correct information. If s, write your name and case ding, Land, or Other Re	ate as p f more e numb	possible. If two married peo space is needed, attach a s er (if known). Answer ever	ople are eparate y question.
_	De veu eur e	n have any land a	u aguitable inter	act in any regidence, building	a land	or cimiler property?	
1.	No. 00.45		or equitable intere	est in any residence, building	g, iand	, or similar property?	
		ere is the property?					
2.		•	-	all of your entries from Part 1			\$0.00
	entries for pag	jes you nave atta	ched for Part 1.	Write that number here		<b>7</b> L	
P	art 2: Des	cribe Your Vel	hicles				
		_		t in any vehicles, whether the e, also report it on Schedule	-	_	
3.	Cars, vans, tru	ıcks, tractors, spo	ort utility vehicle	s, motorcycles			
	□ No						
	✓ Yes						
3.1.			Who ha	as an interest in the property	/?	Do not deduct secured clain	ns or exemptions. Put the
Mak		Jaguar	Check			amount of any secured clair	ns on Schedule D:
Mod	del:	XJ8		otor 1 only		Creditors Who Have Claims	
Yea	ar:	1999		otor 2 only otor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
App	proximate mileag	e: <b>98,000</b>		east one of the debtors and ar	nother	\$3,000.00	\$3,000.00
	er information:		_				
199	99 Jaguar XJ8	(98,000 miles)		eck if this is community prope instructions)	perty		
4.			es, ATVs and oth	er recreational vehicles, other raft, fishing vessels, snowmob			
	✓ No	ato, tranoro, motore	s, personal watere	rait, norming vecocis, onewmos	31100, 111	otoroyolo docessories	
	Yes						
5.		•	•	all of your entries from Part 2 Write that number here			\$3,000.00
		, ,				7	
D	art 3: Des	oribo Vour Do	rsonal and Ho	usahald Itama			

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Deb	Case 16-03837 Doc 1 Filed 02/08/16 Entered 02/08/16 18:48:40 De tor 1 Elvis L. Dotalinatent Page 9 ofc and number (if known) Last Name	sc Main
6.	Household goods and furnishings	
	Examples: Major appliances, furniture, linens, china, kitchenware  No	
	Yes. Describe Misc. furniture, electronics and appliances	\$700.00
7.	Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	✓ No  Yes. Describe	
8.	Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
	✓ No  Yes. Describe	_
9.	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	✓ No  Yes. Describe	
10.	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	✓ No  Yes. Describe	
11.	Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
	□ No ☑ Yes. Describe Normal and necessary clothing	\$200.00
12.	Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	✓ No  Yes. Describe	
13.	Non-farm animals  Examples: Dogs, cats, birds, horses	
	✓ No  Yes. Describe	
14.	Any other personal and household items you did not already list, including any health aids you did not list	
	✓ No  Yes. Give specific information	
15.	Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here	\$900.00
Pa	art 4: Describe Your Financial Assets	

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

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Deb		<b>Elvis</b> First Name	L. Middle Name	Dotain&nt  Last Name	Page 10 of a fumber (if known)	
16.		es: Money you have petition	in your wallet, ir	n your home, in a safe d	eposit box, and on hand when you file yo	our
	☐ No ✓ Yes.				Cash:	\$200.00
17.	-		s, and other sim		es of deposit; shares in credit unions, nave multiple accounts with the same	
	✓ No ☐ Yes.		Institu	tion name:		
18.	Example No		estment account	s with brokerage firms, I	money market accounts	
	☐ Yes.		Institution or iss	uer name:		
19.	-	olicly traded stock a est in an LLC, partr		•	ncorporated businesses, including	
	infor	Give specific mation about	Name of entity:		% of owner	ship:
20.	Negotial	ole instruments inclu	de personal che	cks, cashiers' checks, p	-negotiable instruments promissory notes, and money orders. ne by signing or delivering them.	
	infor	Give specific mation about	lssuer name:			
21.		ent or pension acces: Interests in IRA, profit-sharing pla	ERISA, Keogh,	401(k), 403(b), thrift sav	rings accounts, or other pension or	
	_	List each ount separately. T	ype of account:	Institution name:		
22.	Your sha		osits you have		continue service or use from a company electric, gas, water), telecommunications	3
	☐ No					
	✓ Yes.			Institution name or in		
		Other:		Security Deposit		\$1,050.00
23.	<b>☑</b> No	es (A contract for a			ou, either for life or for a number of year	s)
24.		s in an education IF C. §§ 530(b)(1), 529A		•	program, or under a qualified state tu	ition program.
	✓ No ☐ Yes.		Institution name	and description. Sepa	rately file the records of any interests. 1	1 U.S.C. § 521(c)
25.		equitable or future exercisable for you	-	perty (other than anyt	hing listed in line 1), and rights or	
		Give specific				

Deb	tor 1 Elvis L.  First Name Middle Name	Do <b>ë aim</b> ent	Entered 02/08/16 18:4 Page 11 0tas4number (if kn		Desc Main
26.	Patents, copyrights, trademarks, trade Examples: Internet domain names, webs	secrets, and other intelle			
	✓ No ☐ Yes. Give specific information about them	,	C C		
27.	Licenses, franchises, and other general Examples: Building permits, exclusive lie		ation holdings, liquor licenses, prof	essional licer	nses
	✓ No  Yes. Give specific information about them				
Mor	ey or property owed to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you				
	□ No				***
	Yes. Give specific information about them, including whether of E	Earned Income Credit.		_	
	you already filed the returns and the tax years			State: Local:	\$0.00 \$0.00
20	Family support			Local.	
23.	Examples: Past due or lump sum alimor	ny, spousal support, child su	pport, maintenance, divorce settler	ment, proper	ty settlement
	Yes. Give specific information	ort awad to dabtar Amt	Alimo	ny:	\$0.00
	Support: Back due child suppo	ort owed to deptor. Ami	Mainte	enance:	\$0.00
			Suppo	ort:	\$400.00
			Divord	ce settlemen	:: <b>\$0.00</b>
			Prope	rty settlemer	nt: <b>\$0.00</b>
30.	Other amounts someone owes you Examples: Unpaid wages, disability insu compensation, Social Security			rkers'	
	✓ No ☐ Yes. Give specific information				
31.	Interests in insurance policies  Examples: Health, disability, or life insur	rance; health savings accou	nt (HSA); credit, homeowner's, or re	enter's insura	ance
	Yes. Name the insurance company of each policy		Deceficion	0	
32.	and list its value	, expect proceeds from a life		5	urrender or refund value:
	✓ No ☐ Yes. Give specific information				
33.	Claims against third parties, whether of Examples: Accidents, employment disputed.	•		ent	
	✓ No ☐ Yes. Describe each claim				
34.	Other contingent and unliquidated clairights to set off claims	ims of every nature, includ	ing counterclaims of the debtor	and	
	No Ves Describe each claim				

Deb	tor 1	Case 16-03837 Elvis First Name	Doc 1 L. Middle Name	Filed 02/08/16 Dotainent  Last Name	Entered 02/08/16 18:48:40 Page 12 of 54 number (if known)	
35.	Any	financial assets you di				
	<b>☑</b> 1	•	-			
36.					any entries for pages you have	→ \$5,650.00
P	art 5	Describe Any Bu	ısiness-Rela	ated Property You	Own or Have an Interest In. List	any real estate in Part 1.
		ou own or have any leg				
		No. Go to Part 6. Yes. Go to line 38.				
38	Acc	ounts receivable or con	nmissions vou	ı alroady oarnod		Current value of the portion you own?  Do not deduct secured claims or exemptions.
JO.	₩ 1		illilissions you	alleady earlied		
		Yes. Describe				
39.		ce equipment, furnishin mples: Business-related desks, chairs, ele	computers, sof	tware, modems, printers	s, copiers, fax machines, rugs, telephones	,
		No Yes. Describe				
40.	Mac	hinery, fixtures, equipn	nent, supplies	you use in business, a	and tools of your trade	
		No Yes. Describe				
41.	Inve	ntory				
	口 , 图 ,	No Yes. Describe				
42.	Inter	ests in partnerships or	joint ventures	•		
		No Yes. Describe Name			% of owners	hip:
43.		tomer lists, mailing lists	s, or other con	npilations		
		No Yes. <b>Do your lists inclu</b> No Yes. Describe		identifiable information	on (as defined in 11 U.S.C. § 101(41A))?	
44.	Anv	business-related prope		ot already list		
	<b>☑</b> ¹	No Yes. Give specific inform				
45.					any entries for pages you have	→ \$0.00
Pa	art 6			mmercial Fishing- in farmland, list it in	Related Property You Own or Ha Part 1.	ve an Interest In.
46.	Do y	ou own or have any leg	gal or equitable	e interest in any farm-	or commercial fishing-related property?	,
		No. Go to Part 7. Yes. Go to line 47.				

Debt	tor 1	Case 16-03837 Elvis	Doc 1 L.	Filed 02/08/16 Do <b>cume</b> nt	Entered 02/08/16 18:48:40 Page 13 0f:54number (if known)	Desc Main
		First Name	Middle Name	Last Name		Current value of the portion you own?  Do not deduct secured claims or exemptions.
47.		n animals nples: Livestock, poultry	, farm-raised fi	sh		
		No Yes				
48.	Crop	seither growing or ha	rvested			
		No Yes. Give specific nformation				
49.	Farm	n and fishing equipmen	t, implements	, machinery, fixtures, a	and tools of trade	
	_	√es				
50.	Farm	n and fishing supplies, o	chemicals, an	d feed		
		√o Yes				
51.	Any	farm- and commercial f	fishing-related	I property you did not	already list	
	_	No /es. Give specific nformation				
52.			-		any entries for pages you have	\$0.00
Pa	art 7:	Describe All Prop	perty You C	own or Have an Int	erest in That You Did Not List Abo	ve
53.		ou have other property mples: Season tickets, co			?	
		No Yes. Give specific inform	nation.			
54.	Add	the dollar value of all o	f your entries	from Part 7. Write tha	t number here	\$0.00

Debtor 1 Elvis L. Dobtalment Page 14 of a funmber (if known) \_\_\_\_\_

Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2..... \$0.00 \$3,000.00 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 \$900.00 58. Part 4: Total financial assets, line 36 \$5,650.00 \$0.00 59. Part 5: Total business-related property, line 45 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal 62. Total personal property. Add lines 56 through 61..... \$9,550.00 \$9,550.00 property total \$9,550.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

		1.700	umen Pane	<u>, 12 01</u>					
Fill in this inf	Fill in this information to identify your case:								
Debtor 1	Elvis	L.	Hall, Jr.						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS									
Case number									
(if known)									

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Р	art 1	:	Identify the Property You C	laim as Exempt			
1.		You You	et of exemptions are you claiming? If are claiming state and federal nonbarrare claiming federal exemptions. 11  property you list on Schedule A/B	unkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.		,
		•	tion of the property and line on B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	<b>exe</b> Che	ount of the mption you claim eck only one box for h exemption	Specific laws that allow exemption
Brief description 1999 Jaguar XJ8 (approx. 98000 miles) 1999 Jaguar XJ8 (98,000 miles) Line from Schedule A/B:3.1		\$3,000.00	\$2,400.00 100% of fair market value, up to any applicable statutory limit		735 ILCS 5/12-1001(c)		
						\$600.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
3. Offi	Arecial F	No	claiming a homestead exemption of 106C to adjustment on 4/01/16 and every 5 to adjustment of 4/01/16 and every 6 to adjust				

Debtor 1

First Name Middle Name Last Name

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Case number (if known)

applicable statutory

limit

Part 2: **Additional Page** Brief description of the property and line on **Current value of** Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description \$700.00 \$700.00 735 ILCS 5/12-1001(b)  $\square$ Misc. furniture, electronics and appliances 100% of fair market value, up to any Line from Schedule A/B: 6 applicable statutory limit Brief description \$200.00 \$200.00 735 ILCS 5/12-1001(a), (e)  $\overline{\mathbf{V}}$ Normal and necessary clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit \$200.00 Brief description 735 ILCS 5/12-1001(b) \$200.00  $\overline{\mathbf{Q}}$ Pre-paid debit card. 100% of fair market value, up to any Line from Schedule A/B: 16 applicable statutory limit Brief description \$1,050.00 \$1,050.00 735 ILCS 5/12-1001(b)  $\sqrt{\phantom{a}}$ **Security Deposit with landlord** 100% of fair market value, up to any Line from Schedule A/B: applicable statutory limit Brief description \$4,000.00 \$4,000.00 735 ILCS 5/12-1001(g)(1), (2), (3) ablaAnticipated 2015 Federal Tax Refund. 100% of fair market **Consisting of Earned Income Credit** value, up to any applicable statutory Line from Schedule A/B: 28 limit Brief description \$400.00 \$400.00 735 ILCS 5/12-1001(g)(4)  $\overline{\mathbf{A}}$ Back due child support owed to debtor 100% of fair market value, up to any Line from Schedule A/B: 29

Fill in this inf	ormation to i	dentify your case	:				
Debtor 1	Elvis	L. Middle Name	Hall, Jr.				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS							
Case number (if known)					Check if this is an		
(II KIIOWII)					amended filing		

#### Official Form 106D

# **Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

<ol> <li>Do any creditors have claims secured by your prope</li> </ol>
--

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

# Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A

Amount of claim

Do not deduct the value of collateral

Column B
Value of collateral
that supports this
claim

Column C Unsecured portion If any

Add the dollar value of your entries in Column A on this page. Write that number here:

\$0.00

	10 00007		Document	Page 18 of 5	54	-10 DC30 IV	Tani
Fill in this info	ormation to	identify your o			,		
		1					
Debtor 1	Elvis First Name	Middle Name	Hall, Jr. Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
		NODTHE					
United States Bar	nkruptcy Court	for the: NOR I HE	RN DISTRICT OF I	LLINOIS			
Case number						Check if this is a	an
(if known)					_	amended filing	
Official Form	106F/F						
•	_	\A/l		Olei-me			40/45
Schedule E/	F: Credite	ors wno Hav	e Unsecured	Claims			12/15
Be as complete ar	nd accurate as	s possible. Use Pa	rt 1 for creditors wi	th PRIORITY clair	ms and Part 2 for c	reditors with NO	NPRIORITY
			racts or unexpired I				
			and on Schedule G				
Do not include any	y creditors wi	th partially secure	d claims that are list	ted in Schedule D	Creditors Who H	old Claims Secur	ed by Property.
			fill it out, number the			tach the Continu	ation Page
to this page. On t	he top of any	additional pages, v	write your name and	I case number (if	known).		
Part 1: Lis	t All of You	r PRIORITY Un	secured Claims				
1. Do any credit	ors have prio	rity unsecured clai	ms against you?				
☐ No. Go t	-	•	,				
✓ Yes.	o i ait z.						
			creditor has more th				
			of claim it is. If a clair much as possible, list		•		
•		•	ms, fill out the Contir	•		-	
claim, list the			,				
(For an explan	nation of each t	type of claim, see th	ne instructions for this	s form in the instru	ction booklet		
(i oi aii oxpiai	idion of odon	type of claim, coo ii			Total claim	Priority	Nonpriority
						amount	amount
2.1					\$2,000.00	\$2,000.00	\$0.00
Internal Revenue	e Service				Ψ2,000.00	Ψ2,000.00	Ψ0.00
Priority Creditor's Nam	е		<ul> <li>Last 4 digits of ac</li> </ul>	count number			
Centralized Inso	lvency Oper	ation	When was the del	bt incurred? 2	014		
P.O. Box 7346			As of the date you	ı file the claim is	: Check all that app	lv	
			Contingent	a me, me ciami is	. Oncok all that app	ıy.	
Philadelphia	PA	19101-7346	Unliquidated				
City	State	ZIP Code	<ul> <li>Disputed</li> </ul>				
Who incurred the	debt? Chec	k one.	Type of PRIORITY	/ unsecured clain	n:		
Debtor 1 only			☐ Domestic supp	oort obligations			
Debtor 2 only Debtor 1 and D	ahtor 2 only				ou owe the governme	ent	
At least one of		d another	Claims for dea	th or personal inju	ry wniie you were		
		ommunity debt	Other. Specify	/			
Is the claim subject		•					
<b>☑</b> No							
Yes							

	Case 16-038	37 Doc 1	Filed 02/08/16	Entered 02/08/16 18:48:40	Desc Main
Debtor		L.	Document	Page 19 of 54 Case number (if known)	
	First Name	Middle Name	Last Name		
Part	2: List All of Ye	our NONPRIO	RITY Unsecured C	laims	
3. Do	any creditors have n	onpriority unsecu	red claims against yo	u?	
		ng to report in this p	part. Submit this form to	the court with you other schedules.	
lf a typ	a creditor has more than be of claim it is. Do not	n one nonpriority u list claims already	nsecured claim, list the included in Part 1. If m	order of the creditor who holds each claim creditor separately for each claim. For each core than one creditor holds a particular claim, I out the Continuation Page of Part 2.	claim listed, identify what
					Total claim
4.1	]				\$927.50
	I Scott Harris, P.C. ity Creditor's Name		Last 4 digits of a		
Attorn	eys at Law		When was the de		
Number 111 W	Street est Jackson Blvd., \$	Suite 600	As of the date yo Contingent	ou file, the claim is: Check all that apply.	
			Unliquidated		
Chica	go IL	60604	Disputed		
City	Sta curred the debt? Ch	ate ZIP Code neck one.	Type of NONPRI	ORITY unsecured claim:	
	otor 1 only	ieck one.	Student loans	s rising out of a separation agreement or divorc	20
☐ Del	otor 2 only			not report as priority claims	·C
	otor 1 and Debtor 2 only east one of the debtors		<b>=</b> ~ ~ .	sion or profit-sharing plans, and other similar of	debts
ш	eck if this claim is for		Other. Speci	ry or- Illinois State Toll Highway Auth.	
Is the c	laim subject to offset	?	,	gg	
✓ No ☐ Yes	3				
4.2	]				\$1,566.50
	ey Keith Shindler ity Creditor's Name		Last 4 digits of a		
1990 E	Algonquin Rd. Ste	180	When was the de		
Number	Street		As of the date yo	ou file, the claim is: Check all that apply.	
			Unliquidated		
Schau	mburg IL	60173	Disputed		
City	Sta		Type of NONPRI	ORITY unsecured claim:	
	curred the debt? Chotor 1 only	neck one.	Student loans		
Del	otor 2 only			rising out of a separation agreement or divord not report as priority claims	<del>.e</del>
	otor 1 and Debtor 2 only east one of the debtors		Debts to pen	sion or profit-sharing plans, and other similar	debts
ш.	eck if this claim is for		Other. Speci	fy r - Midland Finance Co.	
ш.	laim subject to offset	-	Attorney to	i - midialid i ilialice CU.	
✓ No	•				

Case 16-03837 Doc 1

Debtor 1

First Name Middle Name

Page 20 of 54 Case number (if known) **Elvis** Last Name

Part 2: Your NONPRIORITY Unsecure	ed Claims Continuation Page	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
Attorney Michael D. Weis  Nonpriority Creditor's Name PO BOX 1166  Number Street NORTHBROOK IL, 60065  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Last 4 digits of account number 8 4 9 1  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Attorney for- Bakemark USA LLC	\$5,668.05
Is the claim subject to offset?  No Yes  4.4  Indiana Department of Revenue  Nonpriority Creditor's Name PO BOX 6072  Number Street	Last 4 digits of account number 8 3 3 2  When was the debt incurred? 2011  As of the date you file, the claim is: Check all that apply.	\$908.28
Indianapolis  IN  46206-6072  City  State  ZIP Code  Who incurred the debt?  Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Taxes	
4.5  McCarthy, Burgess, Wolf Nonpriority Creditor's Name 216000 Cannon Road Number Street  Cleveland OH 44146 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Collecting for - Dex Media	\$1,252.05

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Last Name

Debtor 1

**Elvis** Middle Name First Name

Part 2: Your NONPRIORITY Unsecur	ed Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6  MCSI Nonpriority Creditor's Name 7330 COLLEGE DR Number Street  PALOS HEIGHTS IL 60463	Last 4 digits of account number 2 1 3 1  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	\$250.00
City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  s the claim subject to offset?  ✓ No  Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Collecting for - Village of Chicago Ridge	
Melissa Orta Nonpriority Creditor's Name 7709 W. 82nd Place Number Street  Bridgeview IL 60455 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt s the claim subject to offset?	Last 4 digits of account number 3 2 2 3  When was the debt incurred? 2014  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Lawsuit	\$671.50
Yes  4.8  Merchants Credit Guide Co. Nonpriority Creditor's Name 223 W. Jackson Blvd. #700 Number Street	Last 4 digits of account number 0 2 2 3  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	\$4,483.00
Chicago  IL 60606  City State ZIP Code  Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  s the claim subject to offset?  ✓ No  Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Collecting for - Adventist Hinsdale Hospital	

Debtor 1

Elvis First Name L. Middle Name Document Hall, Jr. Last Name Page 22 of 54

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

Tail 4	cu Olamis Continuation i age	
After listing any entries on this page, number then previous page.	n sequentially from the	Total claim
4.9		£227.00
Municipal Collections of America	Last 4 digits of account number 8 3 8 2	\$337.00
Nonpriority Creditor's Name	When was the debt incurred?	
3348 RIDGE ROAD  Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
LANSING IL 60438	Disputed	
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans  Obligations origing out of a consention agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another  Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collecting for - Village of Justice	
No No		
Yes		
4.10		\$1,014.00
National Account Service	Last 4 digits of account number 0 0 2 6	Ψ1,014.00
Nonpriority Creditor's Name	When was the debt incurred?	
1246 W UNIVERSITY AVE#421 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
SAINT PAUL MN 55104-4101	Disputed	
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans  Obligations origing out of a consention agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another  Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collecting for - Fifth Third Bank	
No No		
Yes		
4.11		\$8.25
Radiology and Nuclear Consultants, L.T.D	Last 4 digits of account number 9 3 2 6	Ψ0.23
Nonpriority Creditor's Name	When was the debt incurred?	
311 W. Monroe 8FL ACSLBX 71260  Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Chicago IL 60606-4660		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans  Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
ш	Other. Specify	
Check if this claim is for a community debt	Medical Bills	
Is the claim subject to offset?  ✓ No		
Yes		

Last Name

Debtor 1

**Elvis** Middle Name First Name

Page 23 of 54 Case number (if known)

Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
Sorman & Frankel Nonpriority Creditor's Name 180 N LaSalle St, #2700 Number Street  Chicago IL 60601 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt as the claim subject to offset?	Last 4 digits of account number 2 1 6 8  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Attorneys for - Lincolnway Check	\$2,900.38
No  Yes  4.13  South Holland Bakery & Supply Co. Nonpriority Creditor's Name 959 Columbia St. Number Street	Last 4 digits of account number 2 4 5 2  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent	\$5,769.67
Crete  L State  ZIP Code  Who incurred the debt?  Check one.  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt	Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Goods and services	
s the claim subject to offset?  No Yes  4.14		\$960.00
State Collection SVC Nonpriority Creditor's Name PO BOX 6250 Number Street	Last 4 digits of account number 1 7 2 5  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	
MADISON    State   ZIP Code     Who incurred the debt?   Check one.   Debtor 1 only     Debtor 2 only     Debtor 1 and Debtor 2 only     At least one of the debtors and another     Check if this claim is for a community debt     sthe claim subject to offset?   No     Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Collecting for - Emergency Healthcare Physician	

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Desc Main

Case 16-03837 Page 24 of 54 Case number (if known) Debtor 1 First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.15 \$176.00 Stellar Recovery Last 4 digits of account number 1 7 3 6 Nonpriority Creditor's Name When was the debt incurred? 1327 HIGHWAY 2 WEST As of the date you file, the claim is: Check all that apply. Street **SUITE 100** Contingent Unliquidated Disputed **KALISPELL** MT 59901 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only П that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Collecting for - Comcast** Is the claim subject to offset? **☑** No ☐ Yes 4.16 \$177.00 Last 4 digits of account number SW Credit Systems, LP <u>5</u> <u>5</u> <u>5</u> <u>7</u> Nonpriority Creditor's Name When was the debt incurred? 4120 INTERNATIONAL PKWY As of the date you file, the claim is: Check all that apply. Number Street Ste 1100 Contingent Unliquidated Disputed Carrolton TX 75007 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Collecting for - ATT Uverse** Is the claim subject to offset? **☑** No ☐ Yes 4.17 \$130,000.00 The Carras Corporation Last 4 digits of account number r\_ <u>l e m</u> Nonpriority Creditor's Name When was the debt incurred? Attn: Nicholas John Carras As of the date you file, the claim is: Check all that apply. Number Street 934 Juniper Road Contingent Unliquidated Disputed IL Glenview 60025 City State ZIP Code Type of NONPRIORITY unsecured claim:

☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts ightharpoonup At least one of the debtors and another Other. Specify Check if this claim is for a community debt Lease agreement

Is the claim subject to offset?

Check one.

**☑** No ☐ Yes

Personal guarantee on business lease: 12246 South Harlem, Palos Heights, IL 60463

Who incurred the debt?

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Debtor 1 Elvis L. Page 25 of 54
Case number (if known)

Last Name

Last Name

Part 2: Your NONPRIORITY Unsect	ured Claims Continuation Page	
After listing any entries on this page, number th previous page.	nem sequentially from the	Total claim
4.18 Torres Credit Services Nonpriority Creditor's Name 27 Fairview Number Street	Last 4 digits of account number 0 7 5 9  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.	\$1,253.00
CARLISLE PA 17013  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify</li> <li>Collecting for - ComEd</li> </ul>	
4.19 US Foods	Last 4 digits of account number	\$6,000.00
Nonpriority Creditor's Name 9399 W. Higgins Rd. #500	When was the debt incurred?	
Number Street  Rosemont IL 60018	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset?  No Yes	Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify  Goods and services	

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Debtor 1

**Elvis** 

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Case number (if known)

Part 3:

Middle Name First Name Last Name

List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Adventist Hinsdale Ho	ospital		On which entry in Part 1 or	or Part 2 did you list the original creditor?
Name 120 N Oak St. Number Street			Line of (Check one Medical Bills	e): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Hinsdale City	IL State	<b>60521</b> ZIP Code	Last 4 digits of account nu	umber
Bakemark USA, LLC			<del></del>	or Part 2 did you list the original creditor?
7351 Crider Avenue Number Street			Lineof (Check one Lawsuit	e): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Pico Rivera	<b>CA</b> State	<b>90660</b> ZIP Code	—— Last 4 digits of account nu	umber <u>8 4 9 1</u>
City of Chicago			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name Department of Revening Number Street BUREAU OF PARKING		RUPTCY	Line of (Check one Parking Tickets	e): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
121 N. LaSalle St. #10 Chicago City	7A IL State	60602 ZIP Code	—— Last 4 digits of account nu	umber
ComEd			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name 3 Lincoln Center Number Street Attn: Bkcy Group-Cla	ims Depa	ırtment	Line of (Check one Utilities	e): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Oakbrook Terrace	IL State	<b>60181</b> ZIP Code	Last 4 digits of account nu	umber
Dawn Foods Name			On which entry in Part 1 o	or Part 2 did you list the original creditor?
9601 Georgia Street Number Street			Line of (Check one Goods and services	e): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Crown Point	IN State	<b>46307</b> ZIP Code	Last 4 digits of account nu	umber
Gordon Food Service			On which entry in Part 1 o	or Part 2 did you list the original creditor?
Name 1300 Gezon Parkway Number Street	SW		Line of (Check one Goods and Services	e): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Wyoming	MI	49509	Last 4 digits of account nu	umber
City	State	ZIP Code		

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**Elvis** 

Debtor 1

Middle Name Last Name First Name

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Case number (if known)

Harris Bank Name 700 Corporate Park Dr, Number Street			On which entry in Part 1 or Part 2 did you list the original creditor?			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Loan/Fees Part 2: Creditors with Nonpriority Unsecured Claims			
Clayton City	MO State	<b>63105</b> ZIP Code	— Last 4 digits of account number			
Ilinois Tollway			On which entry in Part 1 or Part 2 did you list the original creditor?			
Name PO BOX 5544 Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Tollway fines Part 2: Creditors with Nonpriority Unsecured Claims			
Chicago City	IL State	60880-5544 ZIP Code	— Last 4 digits of account number <u>6</u> <u>8</u> <u>4</u> <u>5</u>			
Indian Prairie Public Li	brary		On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 401 Plainfield Rd Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
<b>Darien</b> City	IL State	60561 ZIP Code	— Last 4 digits of account number			
Joseph Napoli			On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 1 East Wacker Drive Number Street Suite 1720			Lineof (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
Chicago, IL 606001			— Last 4 digits of account number			
City	State	ZIP Code	_			
Kendall College			On which entry in Part 1 or Part 2 did you list the original creditor?			
Name 900 North Branch St. Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Goods and Services Part 2: Creditors with Nonpriority Unsecured Claims			
Chicago City	IL State	<b>60642</b> ZIP Code	— Last 4 digits of account number			
Kenneth Donkel, LLC			On which entry in Part 1 or Part 2 did you list the original creditor?			
Attorney at Law Number Street 7220 W. 194th Street, #	±105		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Attorneys for - South Part 2: Creditors with Nonpriority Unsecured Claims  Holland Bakery & Supply			
 Tinley Park	IL	60487	— Last 4 digits of account number 2 4 5 2			
City	State	ZIP Code	<del>_</del>			

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**Elvis** 

Debtor 1

First Name Middle Name Last Name Page 28 of 54 Case number (if known)

#### List Others to Be Notified About a Debt That You Already Listed -- Continuation Page Part 3:

Lincolnway Check Ca	shers, Inc		On which entry in Part 1 or Part 2 did you list the original creditor?
Name 403 W Lincoln Hwy. Number Street			Lineof (Check one):
Chicago Heights		<b>60411</b> ZIP Code	Last 4 digits of account number 2 1 6 8
MB Financial Bank			On which entry in Part 1 or Part 2 did you list the original creditor?
8300 South Madison Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Services Part 2: Creditors with Nonpriority Unsecured Claims
Burr Ridge		<b>60527</b> ZIP Code	Last 4 digits of account number
Nicor Gas			On which entry in Part 1 or Part 2 did you list the original creditor?
Attn: Bankruptcy Dep Number Street 1844 Ferry Rd.	partment		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Utilities
Naperville City		<b>60563</b> ZIP Code	Last 4 digits of account number
Redbox			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 599 Roosevelt Rd. Number Street			Line of (Check one):
Glen Ellyn City		<b>60137</b> ZIP Code	Last 4 digits of account number
Restaurant Depot			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 1000 N. Rohlwig Rd. Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Goods and Services Part 2: Creditors with Nonpriority Unsecured Claims
Lombard City		<b>60148</b> ZIP Code	Last 4 digits of account number
TCF National Bank			On which entry in Part 1 or Part 2 did you list the original creditor?
800 Burr Ridge Parkw Number Street Bankruptcy Departme			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Fees Part 2: Creditors with Nonpriority Unsecured Claims
	IL	60521	— Last 4 digits of account number
City		ZIP Code	

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**Elvis** Debtor 1

Middle Name Last Name First Name

The Reporter News	paper		On which entry in Part 1 or	Part 2 did you list the original creditor?			
Name 12247 Harlem Ave			Line of (Check one):  Part 1: Creditors with Priority Unsecured 0				
Number Street			Services				
			——	Part 2: Creditors with Nonpriority Unsecured Claims			
			— Last 4 digits of account nun	nber			
Palos Heights	IL	60463		<del></del>			
City	State	ZIP Code					
Type Concepts Prin	ting		On which entry in Part 1 or	Part 2 did you list the original creditor?			
Name 12216 S. Harlem			Line of (Check one).	Part 1: Creditors with Priority Unsecured Claims			
Number Street			Goods and Services	Part 2: Creditors with Nonpriority Unsecured Claims			
			—— Last 4 digits of account nun	nher			
Palos Heights	IL	60463	Edot 4 digits of docodine fluid				
City	State	ZIP Code					
Village of Chicago F	Ridge		On which entry in Part 1 or	Part 2 did you list the original creditor?			
Name 10455 S. Ridgeland	Ave.		Line of (Check one).	Part 1: Creditors with Priority Unsecured Claims			
Number Street			Fines	Part 2: Creditors with Nonpriority Unsecured Claims			
				Tart 2. Orealtors with Northholity Griscearea Glaims			
 Chicago Ridge	IL	60415	Last 4 digits of account num	nber			
City	State	ZIP Code					
Village of Oak Lawn			On which entry in Part 1 or	Part 2 did you list the original creditor?			
Name	•			Tart 2 and you not the original oreator.			
9446 S Raymond Av	/e		Lineof (Check one).	Part 1: Creditors with Priority Unsecured Claims			
Number Street			Fines	Part 2: Creditors with Nonpriority Unsecured Claims			
			— Last 4 digits of account nun	nber			
Oak Lawn	IL	60453					
City	State						

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Debtor 1

**Elvis** 

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Part 4:

Middle Name First Name

Last Name

Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$2,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>-</b>	\$0.00
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d.	\$2,000.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> ◀	\$164,322.18
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j.	\$164,322.18

			Docu	ment Pac	ie 31 of	£54				
Fill ir	this info	ormation to iden	tify your case:							
Debtor	· 1	Elvis First Name	L. Middle Name	Hall, Jr. Last Name						
Debtor (Spous	· 2 se, if filing)	First Name	Middle Name	Last Name						
United	States Bar	nkruptcy Court for the	: NORTHERN DIS	TRICT OF ILLIN	IOIS					
Case r (if know	number wn)						_	neck if this is nended filing	an	
Officia	al Form	106G								
Sche	dule G:	Executory C	ontracts and	Unexpired	Leases	5			12	/15
correct On the t	Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).  Do you have any executory contracts or unexpired leases?  No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).									
is f	or (for exa	y each person or comple, rent, vehicle I tracts and unexpired	ease, cell phone). S	•						
	Person or	company with who	n you have the con	tract or lease	State	what the contr	act or leas	e is for		
		McCaine plewood Circle			_	ar Apartment ract to be AS				
	Naperville City	e	<b>IL</b> State	<b>60563</b> ZIP Code	<del>-</del> -					

Fill	in this inf	ormation to ide		imem Pane 37 0	J4	
Deb	tor 1	Elvis	L.	Hall, Jr.		
		First Name	Middle Name	Last Name		
	tor 2 buse, if filing)	First Name	Middle Name	Last Name	_	
Unit	ed States Bar	nkruptcy Court for th	e: <b>NORTHERN D</b>	ISTRICT OF ILLINOIS	_	
Cas	e number				☐ Check if this is an	
(if k	nown)			_	amended filing	
Offi	cial Form	106H				
Sch	edule H:	Your Codeb	tors		12	11
neede page.	ed, copy the On the top	Additional Page, fil of any Additional P	l it out, and numbe ages, write your na	r the entries in the boxes on	correct information. If more space is on the left. Attach the Additional Page to this nown). Answer every question.  Douse as a codebtor.)	
l I	✓ Yes					
	nclude Arizon	a, California, Idaho,			ory? (Community property states and territories exas, Washington, and Wisconsin.)	
[ ]	<b>-</b>		r spouse, or legal e	quivalent live with you at the ti	time?	
	□ No □ Yes					
F	n Column 1, person show creditor on S	n in line 2 again as	a codebtor only if Form 106D), Sche	that person is a guarantor of dule E/F (Official Form 106E	ebtor if your spouse is filing with you. List the or cosigner. Make sure you have listed the E/F), or <i>Schedule G</i> (Official Form 106G). Use	
	Column 1:	Your codebtor			Column 2: The creditor to whom you owe the deb	t
					Check all schedules that apply:	
3.1	Bella's B	akery & Pastries			Schedule D, line	
		Otros et			Schedule E/F, line 4.12	
	Number	Street			Schedule G, line	
					Sorman & Frankel	
	City		State	ZIP Code		
3.2	Bella's B	akery & Pastries			Schedule D, line	
	Number	Street			Schedule E/F, line 5.2	
					Schedule G, line	
					Bakemark USA, LLC	

ZIP Code

State

City

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**Elvis** Debtor 1 First Name

Do**cume**nt

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Middle Name

Last Name

## **Additional Page to List More Codebtors**

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.3	Bella's Bakery & Pastries			Schedule D, line
	J Name			<del>-</del>
	Number Street			Schedule E/F, line 4.17
				Schedule G, line The Carras Corporation
	City	State	ZIP Code	——————————————————————————————————————
	1			
3.4	Bella's Bakery & Pastries Name			Schedule D, line
	Number Street			Schedule E/F, line5.12
				Schedule G, line
				Kenneth Donkel, LLC
	City	State	ZIP Code	<del></del>
3.5	Bella's Bakery & Pastries			Schedule D, line
	Name			
	Number Street			Schedule E/F, line 4.13
				Schedule G, line
	City	State	ZIP Code	South Holland Bakery & Supply Co.
	1	Otato	2.11 0000	
3.6	Bella's Bakery & Pastries Name			Schedule D, line
	Number Street			Schedule E/F, line 4.19
	Number Street			Schedule G, line
				US Foods
	City	State	ZIP Code	<del></del>
3.7	Bellas Bakery & Pastries			Cohodulo D. lino
	Name			Schedule D, line
	Number Street			Schedule E/F, line 4.3
				Schedule G, line
	City	State	ZIP Code	Attorney Michael D. Weis
	1	State	ZIF Code	
3.8	Bellas Bakery & Pastries Name			Schedule D, line
	Number Office			Schedule E/F, line 5.13
	Number Street			Schedule G, line
				Lincolnway Check Cashers, Inc
	City	State	ZIP Code	
3.9	Michael Spizzirri			— Odrable 2 "
0.0	Name			Schedule D, line
	1010 Spring Road Number Street			Schedule E/F, line 4.3
				Schedule G, line
	Darien	IL	60561	Attorney Michael D. Weis
	City	State	ZIP Code	

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**Elvis** First Name

Middle Name

Do**cume**nt Last Name

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Debtor 1

# **Additional Page to List More Codebtors**

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.10	Michael Spizzirri			Schedule D, line
	Name 1010 Spring Road			
	Number Street			<u> </u>
				Schedule G, line Bakemark USA, LLC
	Darien City	IL State	60561 ZIP Code	-
	,   Mish set Outselout			
3.11	Michael Spizzirri Name			Schedule D, line
	1010 Spring Road Number Street			Schedule E/F, line 4.17
				Schedule G, line
	Darien	IL	60561	The Carras Corporation
	City	State	ZIP Code	•
3.12	Michael Spizzirri			
0.12	Name			Schedule D, line
	1010 Spring Road Number Street			Schedule E/F, line 5.12
				Schedule G, line
	Darien	IL	60561	Kenneth Donkel, LLC
	City	State	ZIP Code	
3.13	Michael Spizzirri			Schedule D, line
	Name 1010 Spring Road			
	Number Street			Schedule E/F, line 5.13
				Schedule G, line
	Darien	IL	60561	Lincolnway Check Cashers, Inc
	City	State	ZIP Code	
3.14	Michael Spizzirri Name			Schedule D, line
	1010 Spring Road			Schedule E/F, line 4.12
	Number Street			
				Sorman & Frankel
	Darien City	IL State	60561 ZIP Code	-
	,			
3.15	Michael Spizzirri Name			Schedule D, line
	1010 Spring Road Number Street			Schedule E/F, line 4.13
	Number Street			Schedule G, line
	Darien	IL	60561	South Holland Bakery & Supply Co.
	City	State	ZIP Code	
3.16	Michael Spizzirri			
0.10	Name			Schedule D, line
	1010 Spring Road Number Street			Schedule E/F, line 4.19
				Schedule G, line
	Darien	IL	60561	US Foods
	City	State	ZIP Code	

		Doci	iment Pac	ne 35 o	f 54	
Fill in this inform	mation to identif	your case:				
Debtor 1	Elvis	L.	Hall, Jr.			
	First Name	Middle Name	Last Name		Che	eck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		—   <b>-</b>	An amended filing
	kruptcy Court for the:		DISTRICT OF IL	LINOIS		A supplement showing postpetition chapter 13 income as of the following date
Case number				_		chapter to income as of the following date
(if known)						MM / DD / YYYY
Official Form 10	061					
Schedule I: Yo	our Income					12/15
about your spouse. I your name and case	If more space is nee	ded, attach a se Answer every o	eparate sheet to th			you, do not include information any additional pages, write
Fill in your emplinformation.	oyment		Debtor 1			Debtor 2 or non-filing spouse
If you have more		yment status	Employed			Employed
job, attach a sepa with information a		yment status	☐ Not employed	ed		☐ Not employed
additional employ	ers. Occup	ation	Bakery Manag	er		
Include part-time, or self-employed	, seasonal,	yer's name	Strack and Va			
Occupation may i student or homen applies.	=p.o	yer's address	9632 Cline Ave Number Street	9		Number Street
			Highland	<u>IN</u>	46322	
			City	Stat	e Zip Code	City State Zip Code
	How Id	ong employed t	here? 9 mont	hs		
Part 2: Give	Details About Mo	nthly Incom	е			
Estimate monthly inc			n. If you have noth	ing to repo	ort for any line	e, write \$0 in the space. Include your
If you or your non-filing you need more space,			er, combine the info	ormation fo	or all employe	ers for that person on the lines below. If
				For	Debtor 1	For Debtor 2 or non-filing spouse
	oss wages, salary, and s). If not paid monthly			2	\$3,579.33	
3. Estimate and lis	t monthly overtime p	oay.		3. + _	\$0.00	
4. Calculate gross	income. Add line 2	+ line 3.		4.	\$3,579.33	

Official Form 106l Schedule I: Your Income page 1

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Last Name

Document Hall, Jr. Debtor 1 Elvis

Middle Name

First Name

		Fo	or Debtor 1	For Debtor non-filing s		<u>.                                    </u>		
	Copy line 4 here	4.	\$3,579.33					
5.	List all payroll deductions:	•	_					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$541.67					
	5b. Mandatory contributions for retirement plans	5b.	\$0.00					
	5c. Voluntary contributions for retirement plans	5c.	\$0.00					
	5d. Required repayments of retirement fund loans	5d.	\$0.00					
	5e. Insurance	5e.	\$0.00					
	5f. Domestic support obligations	5f.	\$0.00					
	5g. Union dues	5g.	\$0.00					
	5h. Other deductions. Specify:	_ 5h. <b>+</b>	\$0.00					
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$541.67					
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,037.66					
8.	List all other income regularly received:	-						
	8a. Net income from rental property and from operating a business, profession, or farm	8a	\$0.00					
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.							
	8b. Interest and dividends	8b.	\$0.00					
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00					
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.							
	8d. Unemployment compensation	8d.	\$0.00					
	8e. Social Security	8e.	\$0.00					
	8f. Other government assistance that you regularly receive	•	<u> </u>					
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program)							
	or housing subsidies.	8f.	<b>¢0.00</b>					
	Specify:		\$0.00					
	8g. Pension or retirement income	8g.	\$0.00					
	8h. Other monthly income.  Specify:	_ <sup>8h.</sup> +	\$0.00			1		
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00					
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$3,037.66	+		=	\$3,037.6	66_
11.	State all other regular contributions to the expenses that you list in Sinclude contributions from an unmarried partner, members of your house friends or relatives.			ur roommates,	and oth	ner		
	Do not include any amounts already included in lines 2-10 or amounts that	at are not	available to pay e	expenses liste	d in Sc	hed	ule J.	
	Specify:				11.	+	\$0.0	0
12.	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilitie				12.		\$3,037.6	6
	if it applies.						Combined monthly incor	me

	Case 16-	03837	Doc 1	Filed 02/08/16		2/08/16 18:48:40	Desc Main
Debtor 1	Elvis	L.		Document Hall, Jr.	Page 37 of	54 Case number (if knov	vn)
	First Name	Mi	ddle Name	Last Name			
13. Do	you expect an	increase or o	decrease w	rithin the year after you	ı file this form?		
	No. Yes. Explain:			g approximately \$30 ly to keep receiving		child support for chil	d, but child is now 18

Official Form 106l Schedule I: Your Income page 3

Case 16-03837 Doc 1 Filed 02/08/16 Entered 02/08/16 18:48:40 Desc Main Page 38 of 54 Document Fill in this information to identify your case: Check if this is: □ An amended filing Debtor 1 **Elvis** Hall. Jr. First Name Middle Name Last Name A supplement showing postpetition chapter 13 expenses as of the Debtor 2 following date: (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS MM / DD / YYYY Case number (if known) Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: **Describe Your Household** Is this a joint case?  $\square$ No. Go to line 2. Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2. Do you have dependents? ☐ No Dependent's relationship to Dependent's Does dependent Yes. Fill out this information  $\square$ Do not list Debtor 1 and Debtor 1 or Debtor 2 live with you? age for each dependent..... Debtor 2. No 18 Son Yes ◩ Do not state the dependents' No names. Yes No Yes No Yes No Do your expenses include No expenses of people other than Yes yourself and your dependents? Part 2: **Estimate Your Ongoing Monthly Expenses** Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses \$1,050.00 The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. 4b. Property, homeowner's, or renter's insurance 4b.

4c.

4d.

Home maintenance, repair, and upkeep expenses

Homeowner's association or condominium dues

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Debtor 1 Elvis First Name Middle Name Last Name

		Your expens	ses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$300.00
	6b. Water, sewer, garbage collection	6b.	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$200.00
	6d. Other. Specify:	6d	
7.	Food and housekeeping supplies	7.	\$600.00
8.	Childcare and children's education costs	8.	\$200.00
9.	Clothing, laundry, and dry cleaning	9.	\$75.00
10.	Personal care products and services	10.	\$200.00
11.	Medical and dental expenses	11.	\$100.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$300.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$20.00
14.	Charitable contributions and religious donations	14	
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$150.00
	15d. Other insurance. Specify:	15d.	
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a	
	17b. Car payments for Vehicle 2	17b	
	17c. Other. Specify:	17c.	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you.  Specify:	19.	
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
	20a. Mortgages on other property	20a	
	20b. Real estate taxes		
	20c. Property, homeowner's, or renter's insurance		
	20d. Maintenance, repair, and upkeep expenses		
	20e. Homeowner's association or condominium dues	20e.	

		Case 16-03837 Doc 1 Filed 02/08/16 Entered 02/08/16 18:4  Document Page 40 of 54  Case numbe		Desc Main
Deb	tor 1	Elvis L. Half, Jr. Fage 40 01 Sase numbe	r (if know	n)
21.	Othe	er. Specify:	21.	+
22.	Calc	ulate your monthly expenses.		
	22a.	Add lines 4 through 21.	22a.	\$3,195.00
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$3,195.00
23.	Calc	ulate your monthly net income.	•	
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,037.66
	23b.	Copy your monthly expenses from line 22c above.	23b	\$3,195.00
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	(\$157.34)
24.	Doy	ou expect an increase or decrease in your expenses within the year after you file this form?		
		example, do you expect to finish paying for your car loan within the year or do you expect your mort ment to increase or decrease because of a modification to the terms of your mortgage?	gage	
	$\overline{\mathbf{A}}$	No		
		Yes. Explain here: None.		

	Ouoc	10 00007	Doc Doc	ument Pac	ne 41 of	54	7.40.40 D	COO MAIN	
F	ill in this inf	ormation to	dentify your case						
D	ebtor 1	Elvis	L.	Hall, Jr.					
_		First Name	Middle Name	Last Name					
	ebtor 2 Spouse, if filing)	First Name	Middle Name	Last Name					
U	nited States Bar	nkruptcy Court fo	or the: <b>NORTHERN D</b>	ISTRICT OF ILLIN	NOIS				
	ase number f known)						Check i	if this is an ed filing	
	fficial Form ummary of		ets and Liabilit	ies and Certa	ain Stat	istical Info	ormation	12	/15
cor sch	rrect informatio nedules after yo	on. Fill out all of	possible. If two marrie your schedules first; inal forms, you must f Ir Assets	then complete the	information	on this form.	If you are filing	g amended	
								Your assets Value of what you ow	vn
1.	Schedule A/B	: Property (Offici	al Form 106A/B)						••
	1a. Copy line	e 55, Total real e	state, from Schedule A	/B				\$0.0	<u> </u>
	1b. Copy line	e 62, Total perso	nal property, from Sche	dule A/B				\$9,550.0	<u>)0</u>
	1c. Copy line	e 63, Total of all	property on Schedule A	/B				\$9,550.0	<u> </u>
P	Part 2: Sur	mmarize Υοι	ır Liabilities						
								Your liabilities Amount you owe	
2.			ave Claims Secured by n Column A, Amount of		,	page of Part 1 o	of Schedule D	\$0.0	00
3.			Have Unsecured Claims n Part 1 (priority unsecu	•	,	edule E/F		\$2,000.0	<u>)0</u>
	3b. Copy the	total claims fron	n Part 2 (nonpriority uns	secured claims) from	line 6j of S	chedule E/F		+ \$164,322.	18
						Your tota	al liabilities	\$166,322. <sup>2</sup>	18
P	Part 3: Sui	mmarize You	ır Income and Exp	enses					

Schedule I: Your Income (Official Form 106I)

Schedule J: Your Expenses (Official Form 106J)

\$3,037.66

Copy your combined monthly income from line 12 of Schedule I.....

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Document **Elvis** Debtor 1 First Name Middle Name

P	art 4	Answer These Questions for Administrative and Statistical Records
ô.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?
	□	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes
7.	Wha	at kind of debt do you have?
		Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
	$\overline{\mathbf{A}}$	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
3.		th the Statement of Your Current Monthly Income: Copy your total current monthly income from Sial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.
	Con	witho following angoin patagoring of plaims from Bart A. line 6 of Schodule E/E:

		l otal claim
Fro	m Part 4 on Schedule E/F, copy the following:	
9a.	Domestic support obligations. (Copy line 6a.)	
9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	
9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	
9d.	Student loans. (Copy line 6f.)	
9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	
9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+
9g.	<b>Total.</b> Add lines 9a through 9f.	

Fill in this inf	ormation to iden	tify your case:		
Debtor 1	Elvis First Name	L. Middle Name	Hall, Jr. Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the	NORTHERN DIST	RICT OF ILLINOIS	
Case number (if known)				Check if this is an amended filing

# Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who	s NOT an attorney to help you fill out bankruptcy forms?
<b>√</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I hat true and correct.	e read the summary and schedules filed with this declaration and that they are
X /s/ Elvis L. Hall, Jr. Elvis L. Hall, Jr., Debtor 1	X Signature of Debtor 2
Date <u>02/08/2016</u> MM / DD / YYYY	Date MM / DD / YYYY

Fill	in this info	ormation to i	dentify your	case:			
Deb	tor 1	Elvis	L.	Hall, Jr.			
		First Name	Middle Nan	ne Last Name			
	tor 2 ouse, if filing)	First Name	Middle Nan	ne Last Name			
Unit	ed States Bar	nkruptcy Court fo	the: <b>NORTHI</b>	ERN DISTRICT OF	LLINOIS		
	e number nown)				_	Check if	f this is an ed filing
Offi	cial Form	107					
			Affairs fo	r Individuals F	iling for Bankruptcy	,	12/15
		se number (if kn	•				
Par 1. \ 	What is your of Married Not married	re Details Abo	out Your Ma	rital Status and W	/here You Lived Before		
Par 1. \         	What is your of Married ✓ Not married Ouring the las	re Details Abo current marital s ed st 3 years, have	out Your Ma status? you lived anyw	rital Status and W			
Par 1. \         	What is your of Married ✓ Not married Ouring the las	re Details Abo current marital s ed st 3 years, have	out Your Ma status? you lived anyw	rital Status and W	e you live now?		Dates Debtor 2 lived there
Par 1. \         	What is your of Married Not married Ouring the last Yes. List	re Details Abo current marital s ed st 3 years, have	out Your Ma status? you lived anyw	rital Status and W where other than when last 3 years. Do not in Dates Debtor 1	re you live now?		
Par 1. \         	Mhat is your of Married Not married No Yes. List	re Details Abo current marital s ed st 3 years, have	out Your Ma status? you lived anyw	rital Status and W where other than when last 3 years. Do not in Dates Debtor 1	re you live now? clude where you live now.  Debtor 2:		lived there
Par 1. \         	Mhat is your of Married Not married No Yes. List Debtor 1:	current marital s ed st 3 years, have	out Your Ma status? you lived anyw	rital Status and W where other than when last 3 years. Do not in Dates Debtor 1 lived there	re you live now? clude where you live now.  Debtor 2:		lived there  Same as Debtor 1
Par 1. \         	Mhat is your of Married Not married No Yes. List Debtor 1:	re Details Abordurent marital standard	out Your Ma status? you lived anyw	rital Status and W where other than when last 3 years. Do not in Dates Debtor 1 lived there	clude where you live now.  Debtor 2:  Same as Debtor 1		lived there  ☐ Same as Debtor 1  From

Washington, and Wisconsin.)

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Case 16-03837 Filed 02/08/16 Entered 02/08/16 18:48:40 Doc 1 Dodament Page 45 of a number (if known) Debtor 1 Middle Name Part 2: **Explain the Sources of Your Income** Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. **☑** No ☐ Yes. Fill in the details. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. **☑** No ☐ Yes. Fill in the details. Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Tyes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Debt	or 1	Elvis L.		Do <b>dalme</b> nt	Page 46 of	<b>54</b> number (i	if known) _			
		First Name Mid	ddle Name	Last Name						
	Insidera corpora agent, i	1 year before you filed f is include your relatives; a ations of which you are an including one for a busine is child support and alimor	ny general part officer, directo ss you operate	ners; relatives of ar r, person in control,	ny general partners; or owner of 20% or	partnerships more of thei	s of which y	ou are a gene curities; and a	eral part any man	naging
	✓ No	s. List all payments to an	insider.							
		1 year before you filed f	or bankruptcy	, did you make any	y payments or tran	sfer any pro	perty on a	ccount of a	debt tha	at
	Include	payments on debts guara	anteed or cosig	ned by an insider.						
	✓ No ☐ Ye	s. List all payments that b	penefited an ins	ider.						
Pa	rt 4:	Identify Legal Act	ions, Repo	ssessions, and	Foreclosures					
	List all	1 year before you filed f such matters, including po- cations, and contract dispu-	ersonal injury c					-	_	ustody
	□ No ☑ Ye	s. Fill in the details.								
			Nature of th	e case	Court o	or agency		Sta	atus of	the case
Case			Contract			t Court of C	Cook Cou	nty	— M	Pending
		USA LLC v. Bella's Pastries, Inc., Elvis			Court Na	ame				
		lichael Spizziri, et al.			Number	Street				On appeal
Case	e numbe	er <b>2015-M1-118491</b>							_ □	Concluded
		2010 111 110 101	_		City		State	ZIP Code		
					Olly		Oldio	211 0000		
Case		w Chaoley Dallala	Contract		Circuit Court Na	t Court of C	Cook Cou	nty	— M	Pending
		y Check v. Bella's Pastries, and Elvis				une				On appeal
Hall	-	,			Number	Street				Concluded
Case	e numbe	er <b>2014-M1-152168</b>							_ ⊔	Concluded
			_		City		State	ZIP Code	_	
Case	e title		Contract c	omplaint	Circuit	t Court of C	Cook Cou	nty	_	Donding
Meli	issa O	rta v. Elvis Hall			Court Na	ıme			— ⊔	Pending
					Number	Street			_ 🗆	On appeal
_									🗹	Concluded
Case	numbe	er <b>2014-M5-003223</b>	_							
					City		State	ZIP Code		
Case	e title		Contract la	awsuit	Circuit	t Court of V	Vill Count	у	_	D il'
		land Bakery & Supply			Court Na			-	<b>—</b> ✓	Pending
	v. Bell Elvis l	a's Bakery & Pastries			Number	Street			<b>—</b> □	On appeal
									_ 🗆	Concluded
Case	e numbe	er <b>2015SC002452</b>	_							
					City		State	ZIP Code	_	

Deb		Case 16-0383 Elvis First Name	7 Doc 1 L. Middle Name	Filed 02/08/16 Dotament	Entered 02/08/16 18:4 Page 47 Of & Anumber (if kn		sc Main
10.	seized,	1 year before you f or levied? all that apply and fill			roperty repossessed, foreclosed,	garnished, atta	ched,
	_	Go to line 11.  S. Fill in the informa	tion below.				
11.		•		uptcy, did any creditor make a payment beca	including a bank or financial inst use you owed a debt?	titution, set off a	ny
	✓ No ☐ Yes	s. Fill in the details.					
12.				etcy, was any of your p ustodian, or another of	roperty in the possession of an a ficial?	ssignee for the I	penefit of
	✓ No ☐ Yes	S					
Pa	art 5:	List Certain C	ifts and Con	tributions			
13.	Within	2 years before you	filed for bankru	ptcy, did you give any	gifts with a total value of more th	an \$600 per per	son?
	✓ No ☐ Yes	s. Fill in the details	for each gift.				
14.		2 years before you charity?	filed for bankru	ptcy, did you give any	gifts or contributions with a total	value of more the	nan \$600
	✓ No ☐ Yes	s. Fill in the details	for each gift or co	ontribution.			
Pá	art 6:	List Certain L	.osses				
15.		1 year before you f isaster, or gamblin		etcy or since you filed t	or bankruptcy, did you lose anytl	ning because of	theft, fire,
	□ No ✓ Yes	s. Fill in the details.					
	cribe th	e property you lost curred	and how	Include the amount that	ce coverage for the loss at insurance has paid. List pending the 33 of Schedule A/B: Property.		Value of property lost
асс		k Lesabre- totalle n December 2015 l loss.		ouranos siaims sit in	io da di dandulio 7/15. I Topolly.	12/4/2015	\$500.00

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Debtor 1

**Elvis** 

Document

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Middle Name

List Cartain Payments or Transfers

anyone you con	sulted abou	t seeking ba	Iptcy, did you or anyone else acting on your behalf pay on nkruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services requires		
Yes. Fill in th	ne details.				
Badillo Law Group Person Who Was Paid			Description and value of any property transferred Attorney Fees	Date payment or transfer was made	Amount of payment
PO BOX 56941			_	01/26/2016	\$1,000.00
Number Street					
Chicago	IL	60656	_		_
City	State	ZIP Code	_		
Email or website address			_		
Darson Who Made the De	resent if Not V	2	_		
Person Who Made the Pa  Summit Financial E  Person Who Was Paid			Description and value of any property transferred Pre-filing bankruptcy credit counseling course.	Date payment or transfer was made	Amount of payment
800 E Flower St				1/26/16	\$9.95
Number Street			_		
Гисѕоп	AZ	85712	_		_
City	State	ZIP Code	_		
www.summitfe.org	<u> </u>		_		
anyone who pro	fore you file mised to he	ed for bankru Ip you deal v	ptcy, did you or anyone else acting on your behalf pay on with your creditors or to make payments to your creditor tyou listed on line 16.		perty to
✓ No ☐ Yes. Fill in th	ne details.				

Deb	Case 16-03837 Doc 1 Filed 02/08/16 Entered 02/08/16 18:48:40 Desc Main tor 1 Elvis L. Dotalment Page 49 of a fumber (if known) First Name Middle Name Last Name					
18.	3. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?					
	Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.					
	✓ No  Yes. Fill in the details.					
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)					
	✓ No  Yes. Fill in the details.					
Pá	List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?  Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage					
	houses, pension funds, cooperatives, associations, and other financial institutions.					
	✓ No  Yes. Fill in the details.					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?					
	✓ No  Yes. Fill in the details.					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  ☑ No					
	Yes. Fill in the details.					
Pa	Identify Property You Hold or Control for Someone Else					
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.					
	✓ No ☐ Yes. Fill in the details.					

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Debtor 1

**Elvis** 

Document

Page 50 of a fumber (if known)

Middle Name

#### Part 10: **Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic

5	substance, hazardous material, pollut	ant, contaminant, or similar item.	
Rep	port all notices, releases, and proceed	ings that you know about, regardless of when	n they occurred.
24.	Has any governmental unit notified y law?	ou that you may be liable or potentially liable	e under or in violation of an environmental
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>		
25.	Have you notified any governmental	unit of any release of hazardous material?	
	✓ No ☐ Yes. Fill in the details.		
26.	Have you been a party in any judicia orders.	l or administrative proceeding under any env	ironmental law? Include settlements and
	<ul><li>✓ No</li><li>✓ Yes. Fill in the details.</li></ul>		
P	art 11: Give Details About Yo	our Business or Connections to Any E	Business
27.	Within 4 years before you filed for babusiness?	ankruptcy, did you own a business or have ar	ny of the following connections to any
	☐ A member of a limited liability☐ A partner in a partnership☐ An officer, director, or managi	oyed in a trade, profession, or other activity, eith company (LLC) or limited liability partnership (Ling executive of a corporation evoting or equity securities of a corporation	•
	<ul><li>No. None of the above applies. G</li><li>✓ Yes. Check all that apply above at</li></ul>	o to Part 12. nd fill in the details below for each business.	
	lla's Bakery & Pastries	Describe the nature of the business Bakery	Employer Identification number Do not include Social Security number or ITIN.
	ness Name		EIN:
	246 S. Harlem Ave.		Participants and the d
		Name of accountant or bookkeeper	Dates business existed
Dal	os Heights IL 60463		From <u>02/05/2014</u> To <u>07/10/2015</u>
City	OS Heights IL 60463 State ZIP Code		

Debtor 1	Case 16-038 Elvis First Name	B37 Doc L. Middle Nar	Do <b>e alme</b> nt		02/08/16 18:48:40 Ota5e4number (if known)	Desc Main
	S RESTAURANT I	NC.	Describe the nature of t	the business	Employer Identificatio Do not include Social	n number Security number or ITIN.
Business N					EIN: –	
1 <b>2250 S</b> Number	. Harlem Street					
<b>V</b> uiliboi	Olicet		Name of accountant or	bookkeeper	Dates business existe	d
					From 02/05/2014	To 07/10/2015
Palos H	eights IL	60463				
City	State	ZIP Code				
	Yes. Fill in the detai					
Part 1	2: Sign Below					
hat ansv property or both.	vers are true and co	orrect. I unde tion with a ba	rstand that making a fals nkruptcy case can resul	se statement, con	s, and I declare under penalt cealing property, or obtaini 50,000, or imprisonment for	ng money or
	Hall, Jr., Debtor 1		Signature	of Debtor 2		
Date	02/08/2016		Date			
Did you a	attach additional pa	iges to Your S	tatement of Financial Af	fairs for Individua	als Filing for Bankruptcy (Of	ficial Form 107)?
☑ No ☐ Yes						
Did you p	pay or agree to pay	someone who	o is not an attorney to he	elp you fill out ba	nkruptcy forms?	
<b>√</b> No						
_	Name of person					Petition Preparer's Notice, ature (Official Form 119).

	2ase 10-03037	_	<u>ment Page 52 (</u>	of 5/1	Desc Main
Fill in th	is information to	identify your case:			
Debtor 1	Elvis	L.	Hall, Jr.	_]	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Name	-	
United Stat	tes Bankruptcy Court	for the: NORTHERN DIS	TRICT OF ILLINOIS		
Case numb				-	
(if known)					Check if this is an amended filing
	orm 108 ent of Intention	n for Individuals I	Filing Under Char	oter 7	12/15
If you are ar	n individual filing und	der chapter 7, you must fi	II out this form if:		
■ creditors	s have claims secure	d by your property, or			
■ you have	e leased personal pro	pperty and the lease has i	not expired.		
of creditors		, unless the court extend	, , , , ,	petition or by the date set f must also send copies to t	<u> </u>
	ed people are filing t 's must sign and date		oth are equally responsibl	le for supplying correct info	ormation.
		possible. If more space ne and case number (if kr		ate sheet to this form. On the	he top of any
Part 1:	List Your Cred	itors Who Hold Secu	red Claims		
-	y creditors that you l ne information below		le D: Creditors Who Hold	Claims Secured by Property	y (Official Form 106D),
Identify	the creditor and the	property that is collatera	al What do you inte property that sec		olid you claim the property s exempt on Schedule C?
None.					
Part 2:	List Your Unex	pired Personal Prop	erty Leases		
fill in the inf	formation below. Do	not list real estate leases	s. Unexpired leases are le	ry Contracts and Unexpired asses that are still in effect; pes not assume it. 11 U.S.C	
Describ	be your unexpired pe	ersonal property leases		Wil	Il this lease be assumed?
		ara McCaine			No
Descrip	otion of leased 2 Yea	ar Apartment Lease		$\overline{\checkmark}$	Yes

property:

	Case 16-03837	7 Doc 1	Filed 02/08/16		Desc Main
Debto	r 1 <b>Elvis</b>	L.	Document	Page 53 of 54 Case number (if known)	
	First Name	Middle Name	Last Name		
Par	t 3: Sign Below				
	nder penalty of perjury, I d rsonal property that is su		•	tion about any property of my estate that s	ecures a debt and
X /s/	Elvis L. Hall, Jr.		_ X		
Elv	is L. Hall, Jr., Debtor 1		Signature of	f Debtor 2	

MM / DD / YYYY

Date

Date <u>02/08/2016</u> MM / DD / YYYY

## JNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)

IN RE: Elvis L. Hall, Jr. CASE NO

CHAPTER 7

# **VERIFICATION OF CREDITOR MATRIX**

	The above named Debtor	hereby verifies th	at the attached list	of creditors is true	and correct to the	best of his/her
know	ledge.					

Date .	2/8/2016	Signature	/s/ Elvis L. Hall, Jr. Elvis L. Hall, Jr.
Date		Signature	